IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Title: Document Holder

Inventor(s): Michael Peter Shields

Serial No.: Filing Date: Group No.: Examiner:

DECLARATION /
POWER OF ATTORNEY

Attorney Docket No.: 0108.1E3

As above-named inventor(s), I (we) hereby declare that:

1. My residence and citizenship are as stated by my name.

Full Name of Inventor:		Citizenship:
#1 Michael Peter	Address #1: PO Box 91, Mammoth Lakes,	USA
Shields	California	

I (we) further declare that:

- 2. I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention identified above and is attached hereto.
- 3. I have reviewed and understand the contents of the above identified specification, claims, drawings and abstract and acknowledge my duty to disclose information which is material to the examination of this application in accordance with Title 37 Code of Federal Regulations §1.56.
- 4. The inventor(s) named below does (do) hereby appoint as attorney of record with full power of substitution and revocation, to prosecute the above application and transact all business in the Patent and Trademark Office connected therewith.: 1. David T. Bracken, Registration No. 37,522; Send correspondence to: David T. Bracken, The Law Office of David T. Bracken, 4839 East Bond Avenue, Orange, California 92869
- 5. All statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true. All the above statements were made with knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under §1001 of Title 18 the United States Code, and such willful false statements may jeopardize the validity of the application or any patent issuing thereon.

Inventor Name:	Signature of Inventor:	Date:
#1 Michael Peter Shields	Mins An Unio	1/16/2004